02-11-02

PTO/SB/05 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

UTILITY PATENT APPLICATION **TRANSMITTAL**

86366 Attorney Docket No. SIMON LEMAIRE First Inventor HISTOGRANIN-LIKE PEPTIDES.

Express Mail Label No. EL854676604US (Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS			Assistant Commissioner for Paterns ADDRESS TO: Assistant Commissioner for Paterns Box Patent Application						
See MPEP chapter 600 concerning utility patent application contents.			Washington, DC 20231						
Fee Transmittal Form (e.g., PTO/SB/17)			7. CD-ROM or CD-R in duplicate, large table or						
1. (Submit an original and a dup Applicant claims small		8.	. Nucle	Computer Program (eotide and/or Amino Ac	a <i>ppenaix)</i> id Sequer	ice Su	bmission		
2. See 37 CFR 1.27.				oplicable, all necessary)				
3. Specification (preferred arrangement se	et forth below)		a	Computer Readabl					
Descriptive title of the invention Cross Reference to Related Applications			b. Specification Sequence Listing on:						
 Statement Regard 	ding Fed sponsored R & D		i. CD-ROM or CD-R (2 copies); or						
- Reference to sequence or a computer pro	uence listing, a table, gram listing appendix		ii. paper						
 Background of the 	e Invention	_	c. Statements verifying identity of above copies						
	of the Drawings (<i>if filed</i>)	-	ACCOMPANYING APPLICATION PARTS						
Detailed DescriptClaim(s)	ion	ļ	9. Assignment Papers (cover sheet & document(s)) \(\square \) 37 CFR 3.73(b) Statement Power of						
- Abstract of the D	isclosure		10	(when there is an a			Attorney		
4. Drawing(s) (35 U.S	S.C. 113) Total Sheets 6	1 1	11.	English Translation		nt (if ap	oplicable)		
5. Oath or Declaration	[Total Pages	j	12.	Information Disclos Statement (IDS)/P		V	Copies of IDS Citations		
V N. J. Washington and Control of Company			13. Preliminary Amendment						
a. Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d)) b. (for continuation/divisional with Box 18 completed)			Return Receipt Postcard (MPEP 503) (Should be specifically itemized)						
DELETION OF INVENTOR(S) 15. Certified Copy of Priority Document(s)									
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR			16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35						
1.63(d)(2) and 1.33(b).			_	or its equivalent.	ani musi a	llauri	OHIT TO/OB/00		
6. Application Data Sheet. See 37 CFR 1.76			17. Other:						
18. If a CONTINUING APPLIC	ATION, check appropriate box, and	supply the	e requ	isite information below	and in a p	relimin	ary amendment,		
or in an Application Data Shee	of under 37 CFR 1.76: Divisional Continuation-in-part (0	CIP)	o	f prior application No.:					
Grup At lint									
and a supplied under									
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from the prior application and is hereby incorporated by reference. Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.									
19. CORRESPONDENCE ADDRESS									
Customer Number or Bar Coo	de Label (Insert Customer No. or Atta	ich bar cede l	abel he	or	Correspond	dence ad	ddress below		
Name	GERALD T. SHEKLETC	N, ES	Q.						
	WELSH & KATZ, LTD.								
Address	120 SOUTH RIVERSIDE PLAZA	A, 22ND I	FLOC	DR					
City	CHICAGO	Sta	TILLITTOIO		60606				
Country	UNITED STATES	Telepho	ne	312-655-1500	Fa	X	312-655-1501		
Name (Print/Type)	GERALD T. SHEKLETON		Reg	istration No. (Attorne	y/Agent)		27,466		
Signature		July To Shept			Date 02/07/2002				

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

PTO/SB/17 (11-01)
Approved for use through 10/31/2002. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE of information unless it displays a valid OMB control number

CEE	TDANCE	JITTA	ī			•	Co	omplete	if Know	n		
FEE TRANSMITTA for FY 2002			┺┟	Appl	ication	Numl	ber					
TOT FY 2002			F	Filing Date								
Patent fees are subject to annual revision.				First Named Inventor								
Applicant claims small entity status. See 37 CFR 1.2			27	Examiner Name								
Applicant Grants Strain Chity Status. Gee 57 Of N. 1.2				Group Art Unit								
TOTAL AMOUNT OF PAYMENT \$376		0.00 Attorney Docket No		No.	86366							
METU	OD OF DAVMENT											
METHOD OF PAYMENT (check all that apply)			FEE CALCULATION (continued) 3. ADDITIONAL FEES									
	U Order U	ther None		DDITIK Entity			<u>.</u>					
Deposit Accor	unt		Fee Code	Fee (\$)	Fee Code	Fee (\$)		Fee	Descripti	on	F	ee Paid
Account Number	23-0920		105	130	205		Surch	arge - late	filing fee o	oath		
Deposit			127	50	227	25	Surch		provisional	filing fee or co	over	
Account Name	Welsh & Katz,	Ltd.	139	130	139	130			oecification		Γ	
	is authorized to: (check all that	apply)	147	2,520	147	2,520	For fil	ing a requ	est for <i>ex pa</i>	arte reexamina	ation	
Charge fee(s) in	dicated below Credit as	ny overpayments	112	920*	112	920*	Requi		lication of S	IR prior to Exa	aminer	
Charge any add	itonal fee(s) during the pendency	of this application	113	1,840*	1131	,840*	Requ	esting pub	lication of S	IR after Exam	iner [
	dicated below, except for the fil	ling fee	115	110	215		action		ply within fir	et month	<u>_</u>	
to the above identifie	· · · · · · · · · · · · · · · · · · ·		115 116	110 400	215					econd month	L_	
	FEE CALCULATION		117	920	217				ply within th		_	
1. BASIC FIL Large Entity Sr				1,440	218				ply within fo			
Fee Fee Fe	e Fee Fee Description	Ess Daid		1,960	228				. , ply within fif			
	de (\$)	Fee Paid	119	320	219	160	Notice	e of Appea	ı		F	
101 740 20 106 330 20	1 370 Utility filing fee 6 165 Design filing fee	370.00	120	320	220	160	Filing	a brief in s	support of a	n appeal		
l i	7 255 Plant filing fee		121	280	221	140	Requ	est for oral	hearing			
108 740 20	•		138	1,510	138	1,510	Petitio	on to institu	ute a public	use proceedin	ng [
114 160 21	4 80 Provisional filing fee	»	140	110	240	55	Petitio	on to revive	e - unavoida	ible		
·	SUBTOTAL (1)	\$370.00		1,280	241				e - unintenti	onal		
2. EXTRA CL	AIM FEES FOR UTILIT	Y AND		1,280	242				(or reissue)			
		e from elow Fee Paid	143	460	243		_	n issue fee	€		<u> </u>	
Total Claims	18 -20** = 0 X	= 0.00	144	620	244			issue fee	Commission	201	Ļ	
Independent Claims	3 - 3** = 0 X	= 0.00	122	130	122 123					R § 1 17(q)	<u> </u>	
Multiple Dependen		=	123 126	50 180	123	-		•	nformation [• ("	L	
Large Entity Sn Fee Fee Fe	<u>nall Entity</u> e Fee Fee Descrij	otion					State	ment			. L	
Code (\$) Co	de (\$)		581	40	581	40	Recor	rding each s number c	patent assi of properties	gnment per pr ;)	roperty	
103 18 203			146	740	246	370		a submiss FR § 1.12	ion after fin	al rejection		
102 84 202	· ·		149	740	249	370	For ea	ach additio	nal inventio	n to be exami	ned [
		nt claim, if not paid	179	740	279	270		FR § 1.12 est for Con		mination (RCE	<u>-</u>)	
109 84 209	9 42 ** Reissue indepe over original pat		169	900	169		•		edited exan	·	·	
110 18 210			109	300	1 ,00	200		esign appl			Ļ	
	and over origina	paterit	Oth	er fee (specify)						. L	
	SUBTOTAL (2)	\$0.00								Γ		
**or number previously paid, if greater; For Reissues, see above			*Reduced by Basic Filing Fee Paid SUBTOTAL (3)									
SUBMITTED BY	<u> </u>								Complete (ıf applicable)		
Name (Print/Type)	Gerald T. S	Shekleton			ation No //Agent)	٠	27,4	166	Telephone	31	2-655-1500)
Signature	. 50	uld To 8							Date	02-	-07-2002	

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on

CERTIFICATE OF In pplicant(s): Dr. Simon	Docket No. 86366		
Serial No. Not yet assigned	Filing Date herewith	Examiner	Group Art Unit
vention: Histogranin -l	Like Peptides and Non-Peptides,	Processes for Their Preparation	and Uses Thereof
I hereby certify that the	following correspondence:		
New patent application	n and related papers		
	(Identify type of the United States Postal Service elope addressed to: The Assista	•	
02/07/2	2002		
		Fred Fran (Typed or Printed Name of Person M (Signature of Person Mailing	
		EL85467660 ("Express Mail" Mailing I	

Note: Each paper must have its own certificate of mailing.